

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2009

| | (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-----|----------------------------|---|-------------------------------------|
| 1. | Automobile Liability | | |
| | Private Passenger | 316,219 | 1.9 |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | 43,381 | -15.3 |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Loss Costs Filing and Revised Loss Cost Multiplier

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.ACE American Insurance
Company

Name of Company

Viola McBride, Regulatory
Associate

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2009

| | (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-----|----------------------------|---|-------------------------------------|
| 1. | Automobile Liability | | |
| | Private Passenger | <u>5,921</u> | <u>4.3</u> |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | <u>1,634</u> | <u>-11.3</u> |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Loss Costs Filing and Revised Loss Cost Multiplier

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

ACE Fire Underwriters

Insurance Company

Name of Company

Viola McBride, Regulatory

Associate

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/01/2009

| | (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-----|----------------------------|---|-------------------------------------|
| 1. | Automobile Liability | | |
| | Private Passenger | 10,201 | 12.0 |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | 5,829 | -11.5 |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Loss Costs Filing and Revised Loss Cost Multiplier

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

ACE Property & Casualty
Insurance Company
Name of Company

Viola McBride, Regulatory
Associate
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective NB: 06/06/2009 RB: 07/12/2009.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | \$6,678,614 | 3.5% |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | \$2,403,370 | 2.1% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No.

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

We are changing base rates, class relativities, territory relativities,
fleet factors, cost new relativities, the private passenger vehicle factor, driver age factors, and the bus discount. Named Perils
coverage is being made obsolete for commercial vehicles.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Auto-Owners Insurance Company

Name of Company

Kelly Staake, Administrator, Commercial Auto Actuarial

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 1-1-10

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | <u>2,339,104</u> | <u>-4.7%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | <u>584,020</u> | <u>+4.8%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adopting ISO's CA-2009-BRLA1 loss cost
revision with a 1-1-10 effective date.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Bituminous Casualty Corporation

Name of Company

Dan Trotter - Director - Rate Development & Filings

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 1-1-10

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | <u>35,374</u> | <u>-4.7%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | <u>4,496</u> | <u>+4.8%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adopting ISO's CA-2009-BRLA1 loss cost
revision with a 1-1-10 effective date.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Bituminous Fire and Marine Insurance Company
Name of Company

Dan Trotter - Director - Rate Development & Filings
Official - Title

SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective 10/1/2009

| (1) | (2) | (3) |
|-------------------------------|--------------------------------------|------------------------------|
| Coverage | Annual Premium Volume (Illinois)* | Percent Change (+ or -)** |
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | \$561,052 | -3.20% |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | \$231,182 | -3.20% |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adopting ISO filing number CA-2009-BRLA1

* Adjust to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

COLUMBIA MUTUAL INS. CO.

Name of Company

Dennis McVay, CPCU
Director, Research & Development
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 12/1/2009

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|---------------------------------|---|-------------------------------------|
| 1. Automobile Liability Private | | |
| Passenger Commercial | <u>1,361,598</u> | <u>-5.20%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger Commercial | <u>338,596</u> | <u>2.60%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO loss costs
CA-2009-BRLA1 effective December 1, 2009. Our LCM remains unchanged (Liability - 1.45 & Physical Damage - 1.50).

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Everest National Insurance Company

Name of Company

Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 10/01/2009.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger Commercial | <u>146,364</u> | <u>-4.7%</u> |
| 2. | Automobile Physical Damag Private Passenger Commercial | <u>15,506</u> | <u>+4.7%</u> |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: Trucks, Tractors & Tractors

Brief description of filing. (If filing follows rates of an advisory

Organization, specify

organization):

Filing is to adopt ISO's commercial auto revised

Loss Costs for Illinois.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Gateway Insurance Company

Name of Company

Lyn Ward, V.P. Compliance

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/01/2010

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | <u>\$75,764</u> | <u>-5.2%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | <u>\$3,185</u> | <u>+2.6%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Reference Filing CA-2009-BRLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

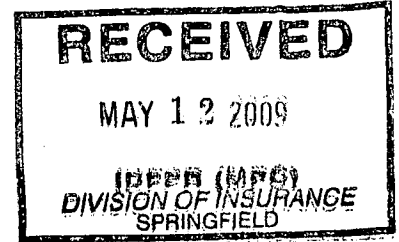
Greater New York Mutual
Insurance Company
Name of Company

Denise Murray, AVP
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision
effective August 1, 2009.

| | (1) | (2) | (3) |
|-----|--|---------------------------------------|-----------------------------|
| | Coverage | Annual Premium Volume (Illinois) * | Percent Change (+or-) ** |
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | 301,537 | -1.65% |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | 93,759 | -1.65% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | 59,530 | -1.40% |
| 10. | Extended Coverage | 91,272 | -1.40% |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Apply a package modification factor
to risks with Garage and Commercial Property coverages.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Iowa American Insurance

Name of Company

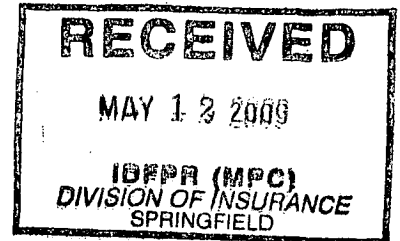
Beverly Barber - Compliance

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate revision
effective August 1, 2009.

| (1) | (2) | (3) |
|---|---------------------------------------|-----------------------------|
| Coverage | Annual Premium Volume (Illinois) * | Percent Change (+or-) ** |
| 1. Automobile Liability Private Passenger Commercial | 965,617 | -1.65% |
| 2. Automobile Physical Damag Private Passenger Commercial | 357,394 | -1.65% |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | 500,190 | -1.40% |
| 10. Extended Coverage | 378,247 | -1.40% |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify

organization): Apply a package modification factor
to risks with Garage and Commercial Property coverages..

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Iowa Mutual Insurance

Name of Company

Beverly Barber - Compliance

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 10-1-09

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | \$54,267 | -5.2 |
| 2. Automobile Physical Damage Private Passenger Commercial | \$6,895 | 2.6 |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____
 Adoption of ISO Loss Costs, CA-2009-BRLA1

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Liberty Insurance Underwriters, Inc.

Name of Company

Lori Hartleben
Senior State Filings Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10-01-09

| (1) Coverage | | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-----------------|----------------------------|---|-------------------------------------|
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | <u>5,483,000 (NCC)</u> | <u>-3.2%</u> |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | <u>1,239,000 (NCC)</u> | <u>-3.2%</u> |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

National Casualty Company and Scottsdale Indemnity Company are advising your department of their intent to adopt the ISO loss cost revisions for our currently filed Commercial Automobile program.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

National Casualty Company
Name of Company

Dawn Gormley, State Filing Analyst
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/1/2009

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | 1,360,273 | -5.2 |
| 2. Automobile Physical Damage Private Passenger Commercial | 985,026 | 2.6 |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Loss Cost filing CA-2009-BRLA1.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Navigators Insurance Company

Name of Company

Valerie Brink, Compliance Analyst

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 10-1-2009.

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | <u>1,216,083</u> | <u>-5.2%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | <u>186,319</u> | <u>+2.6%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Old Republic General Insurance Corporation
wishes to file CA-2009-BRLA1.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Old Republic General Insurance Corporation

Name of Company

Deborah J. Matthews - AVP - Compliance

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 10/01/09

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|-------------------------------|---|---|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | <u>3,137,440</u> | <u>-5.2%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | <u>552,637</u> | <u>+2.6%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Old republic Insurance Company would like
to adopt ISO CA-2009-BRLA1.

* Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Old Republic Insurance Company
Name of Company

Deborah J. Matthews - Manager - Regulatory Compliance
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective NB: 06/06/2009 RB: 07/12/2009.

| | (1) Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|-----|--|--|------------------------------------|
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | \$4,905,240 | 3.3% |
| 2. | Automobile Physical Damag Private Passenger | | |
| | Commercial | \$2,228,452 | 2.3% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No.

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

We are changing base rates, class relativities, territory relativities,
fleet factors, cost new relativities, the private passenger vehicle factor, and driver age factors.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Owners Insurance Company

Name of Company

Kelly Staake, Administrator, Commercial Auto Actuarial

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10-01-09

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | <u>763,000 (SIN)</u> | <u>-3.2%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | <u>228,000 (SIN)</u> | <u>-3.2%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

National Casualty Company and Scottsdale Indemnity Company are advising your department of their intent to adopt the ISO loss cost revisions for our currently filed Commercial Automobile program.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Scottsdale Indemnity Company
Name of Company

Dawn Gormley, State Filing Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective October 1, 2009

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|--|---|--------------------------------------|
| 1. Automobile Liability Private Passenger Commercial | <u>\$1,700</u> | <u>-5.2%</u> |
| 2. Automobile Physical Damage Private Passenger Commercial | <u>\$1,217</u> | <u>2.6%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| <u>Line of Insurance</u> | | |

Does Filing only apply to certain territory (territories) or certain
classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization):

Adoption of ISO's Revised Commercial Automobile
Advisory Prospective Loss Costs Revision
CA-2009-BRLA1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Seneca Insurance Company
Name of Company

Kevin Purcell - VP (IRC)
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

October 1, 2009

| (1) Coverage | (2) Annual Premium Volume (Illinois)* | (3) Percent Change (+ or -)** |
|-------------------------------|---|-------------------------------------|
| 1. Automobile Liability | | |
| Private Passenger | | |
| Commercial | <u>\$457,187</u> | <u>-5.2%</u> |
| 2. Automobile Physical Damage | | |
| Private Passenger | | |
| Commercial | <u>\$116,178</u> | <u>+2.6%</u> |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Insurance Services Office, Inc. (ISO)CA-2009-BRLA1, Revised Commercial Auto Advisory Prospective Loss Cost

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Stonington Insurance Company

Name of Company

Senior Counsel – Compliance Manager

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective October 1, 2009

| (1) <u>Coverage</u> | (2) <u>Annual Premium Volume (Illinois)*</u> | (3) <u>Percent Change (+ or -)**</u> |
|---|---|---|
| 1. Automobile Liability Private Passenger Commercial | \$200,179 | -5.2% |
| 2. Automobile Physical Damage Private Passenger Commercial | \$59,590 | 2.6% |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other _____ | | |
| Line of Insurance | | |

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO reference filing CA-2009-BRLA1

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

SUA Insurance Company

Name of Company

Michael Gooding, Director of Regulatory Affairs & Legal Com

Official - Title

